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COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
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BIBDATASHEET

CONFIRMATION NO. 8353

Bib Data Sheet

SERIAL NUMBER 09/944,049	FILING DATE 08/30/2001 RULE	CLASS 435	GROUP ART UNIT 1648	ATTORNEY DOCKET NO. 019934-002510US
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APPLICANTS

Thomas J. Schall, Meno Park, CA;

Mark E.T. Penfold, Mountain View, CA;

** CONTINUING DATA *****

This appln claims benefit of 60/229,365 08/30/2000

MM

** FOREIGN APPLICATIONS *****

None MM

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** SMALL ENTITY **

** 09/28/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 9	TOTAL CLAIMS 76	INDEPENDENT CLAIMS 6
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <u>[Signature]</u> Initials <u>MM</u>				

ADDRESS

20350
TOWNSEND AND TOWNSEND AND CREW, LLP
TWO EMBARCADERO CENTER
EIGHTH FLOOR
SAN FRANCISCO, CA
94111-3834

TITLE

CMV VACCINES

FILING FEE RECEIVED 1326	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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SERIAL NUMBER 09/944,049	FILING DATE 08/30/2001 RULE	CLASS 435	GROUP ART UNIT 1648	ATTORNEY DOCKET NO. 019934-002510US	
APPLICANTS Thomas J. Schall, Meno Park, CA; Mark E.T. Penfold, Mountain View, CA;					
** CONTINUING DATA ***** This appln claims benefit of 60/229,365 08/30/2000					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 09/28/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY CA	SHEETS DRAWING 9	TOTAL CLAIMS 76	INDEPENDENT CLAIMS 6
ADDRESS 20350					
TITLE CMV VACCINES					
FILING FEE RECEIVED 1065	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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CONFIRMATION NO. 8353

SERIAL NUMBER 09/944,049	FILING DATE 08/30/2001 RULE	CLASS 435	GROUP ART UNIT 1645	ATTORNEY DOCKET NO. 019934-002510US	
APPLICANTS Thomas J. Schall, Meno Park, CA; Mark E.T. Penfold, Mountain View, CA;					
** CONTINUING DATA ***** THIS APPLN CLAIMS BENEFIT OF 60/229,365 08/30/2000					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 09/28/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>Examiner's Signature</u> <u>Initials</u>		STATE OR COUNTRY CA	SHEETS DRAWING 9	TOTAL CLAIMS 76	INDEPENDENT CLAIMS 6
ADDRESS 20350					
TITLE Inhibition of CMV infection and dissemination					
FILING FEE RECEIVED 1065	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		